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ABSTRACT

This paper addresses the theory and data from differing disciplines regarding the generic aspects of nonnormative crises (those unrelated to ontogeny or stage of the family life cycle) in order to increase understanding of the underlying processes involved. The first part of the paper reviews the literature on the study of family crises, identifying major research issues: (1) the event (classifying the nature of the event); (2) resources, i.e., individual resources (abilities, personality traits) and family resources (cohesion, adaptability); and (3) definition, i.e., the family definition of the severity of the change. The second section of the paper offers an eclectic model of nonnormative crises which focuses on the context of the crisis, proposing that all crises have both direct and indirect effects, and all crises have an impact at more than one level. The context model is illustrated through the personal account of a mastectomy, the accounnt of the impact of an extensive flood, and by differing accounts of job layoff. Figures illustrating the contexts of the mastectomy and flood crises are included. (PAS)

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AN ATTEMPT AT AN ECLECTIC MODEL OF NONNORMATIVE CRISES

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AN ATTEMPT AT AN ECLECTIC MODEL OF NONNORMATIVE CRISES

Introduction

Medical advancements, increased life span, technological development, and more complex lifestyles seem to have increased the probability that individuals and families will face crises of a nonnormative nature; i.e., those unrelated to ontogeny or stage of the family life cycle. Concomitant with this increase is an upswing of interest in crises on the part of professionals: New crisis models have been proposed, research in the area has burgeoned, and self-help materials and groups have become commonplace. The professional literature on nonnormative crises represents a variety of disciplines in addition to family studies such as medicine, psychiatry, psychology, especially clinical and social, social work, and sociology. Thus, the literature is variant in part because of the unique approach of the different disciplines; i.e., each focuses on a different unit of analysis, different process, and different outcomes. In addition, some are interested in preventative aspects of crisis while others focus on resolution or post-crisis intervention, and still others work at understanding the crisis process itself.

This paper is an attempt to integrate theory and data from differing disciplines regarding generic aspects of crises so as to increase our understanding of the underlying processes involved. Existent crisis models, derived from the above literature, have as their focus, one level of the social system as their unit of analysis; e.g., the individual, the family, or the community. They do not reflect the fundamental interdependence of these levels (Riegel, 1976). The models are not mutually exclusive, however. Drawing from them, and empirical data which support their basic tenets, a broad, eclectic approach is attempted. The rationale for this effort is the need for a model homologous to the social system in which individuals and families are embedded. Additionally, the model is designed to circumvent several unresolved issues plaguing the family crisis literature. The first part of the paper attends to those issues.

Outstanding Issues in the Study of Family Crises

In their decade review article on family stress and coping, McCubbin, Joy, Cauble, Comeau, Patterson, and Needle (1980) observe that since the publication of Hill's (1949) A,B,C,X model, the "major variables and their relationships . . . have remained virtually unchanged for over 30 years" (p. 855). The troublesome issues in family stress have been with us that long as well. These issues are explored in line with Hill's model.

A: the event. One obvious problem with the concept of the event is its inability to recognize non-events as stress producing. The absence of change or the failure of an expected event to occur may be stressful (Caplan, 1964). Research supports the notion that being off-time with respect to a developmental transition can be difficult (Harkins, 1978). Another problem comes when trying to identify the event at a singular point in time (Perlman & Warren, 1977). Take as an example, the crisis of an individual diagnosed as having cancer. What is the event? Is it the discovery of one or several of the warning signals? Is it the time at which the diagnosis is made? Is it the post-shock realization? Is it the failure to recover fully after treatment? Obviously, some events have emerging features that may be distinguishable in time but are part of a continuing process. To identify one event ignores cumulative

features and artificially locates the major stress at a particular point. A third problem arises in the distinction between symptoms and causes. Tucker (1982) has identified drug-taking in women as both symptomatic of other life stresses and antecedent to later difficulties. When a crisis-producing event is a result of another crisis-producing event, is it appropriate to identify it is an event; i.e., is it meaningful to isolate it from its surrounding processes? McCubbin and Patterson (1981) recognized this problem when they proposed the Double A,B,C,X model. Still, their model requires the identification of an initial event to begin the crisis process.

Some individuals have proposed schema for classifying the nature of the event; e.g., frequency and speed of onset (Dynes, 1970); internality vs. externality (Hill, 1949); and severity and duration (Lipman-Blumen, 1975). Yet these factors seem to be differentially important depending on other circumstances extant at the "time" of the event. (Note that these schema require the identification of a particular event, thus raising issues addressed previously.) The contours of the event are important but not outside of the broader socio-historical context. That is, the characteristics of the event ultimately will tell us less than the characteristics of the individual and her/his social environment.

An additional point should be mentioned. Some have postulated the predictability of an event as an important factor determining the severity of the crisis (Dynes, 1970; Lipman-Blumen, 1975). Recent research and a review of the literature by Bandura (1982) however, that controllability is a much more important variable.

B: resources. Much of the theoretical work in family studies subsequent to the publication of Hill's A,B,C,X model (1949) has been in the nature of explicating the B factor (Burr, 1973; Hansen & Johnson, 1979; McCubbin, 1979; McCubbin et al., 1980; McCubbin & Patterson, 1981). Although some are careful to distinguish between individual resources, such as abilities, experience, personality traits, etc., and family resources, such as cohesion, adaptability, etc., many fail to make it. This distinction is important for two reasons:

1. Some properties are individual properties and cannot be addressed as group properties; e.g., self-esteem, intelligence, locus of control, etc. To indicate that a wife's seeking emotional support from friends is a family coping mechanism is confusing the unit of analysis (Thompson & Walker, 1982).

2. Because the same crisis affects individuals in the family in very different ways, and because individual family members have different resources, unique, individual coping patterns are essential to crisis resolution.

This second point can be illustrated as follows: Say, for example, a husband who is the primary breadwinner in a traditional family becomes physically disabled and is no longer able to work. The stresses on him are very different from those on other family members. Hansen & Hill (1964) suggest this when they write: "Not all stress results in equal strain on all (family) members" (p. 808). This particular husband must cope with biological changes that result in decreased capacity to cope with the physical environment. Additionally, there is a psychological component; the man may think of himself temporarily as sick but ultimately will come to think of himself as different. Changes in self-esteem are inevitable. In addition, he faces changes in his social relation-

ships. In part, resolution of this crisis entails a renegotiation of the marital relationship. Furthermore, there are likely to be effects on the family's cohesion (Adams & Lindemann, 1974). However his particular problems are resolved depends a great deal on his own history, abilities, and characteristics, in addition to those of other family members. The resolution of his crisis may have positive, negative, or neutral influences on the family's characteristics. Simultaneously, other family members face their own versions of this crisis of physical disability. The wife may feel pressured to increase her earnings to support the family as her husband, in this scenario, is unable to perform this role. In addition, her homemaking tasks may require alteration to facilitate his negotiation in and around the home. As part of her nurturant function, she is called upon to help her spouse and children cope with the psychological impact of the disability. A biological adjustment is not required of her; the nature of her crisis is phenomenologically very different from his. Finally, the children have their own version of the crisis. Perhaps they have difficulty thinking of their father as unable to engage in outdoor recreational activities in the way that the fathers of their peers do. In any case, especially if they are very young children, they are unlikely to face much change in their day-to-day lives; certainly not as much change as is required of their father and mother.

Making the distinction regarding the way in which a particular crisis affects individual members of a family might help us understand why some families face more difficulties under stress than others. In addition, it enables a close examination of the crisis process rather than a global, superficial overview. Close scrutiny will facilitate knowledge of resources and their effectiveness. A discussion of individual, family, and network resources follows.

Considerable attention has been devoted to individual coping strategies in the literature. Strategies and characteristics backed by sound empirical support are addressed here. In an excellent, extensive review of the literature, Bandura (1982) identifies perceived self-efficacy as a critical variable in human behavior. He defines perceived self-efficacy as "judgments of how well one can execute courses of action required to deal with prospective situations" (p. 122). Percepts of efficaciousness exert considerable influence on the amount of effort an individual will expend as well as how long an individual will persist under adverse circumstances. Of course, perception of efficacy is affected by many factors, among them predictability and controllability. Nevertheless, it is a significant behavioral influence and seems especially pertinent to stressful situations. Kobasa and her colleagues (Kobasa, 1979; 1982; Kobasa, Maddi, & Kahn, 1982) identify three factors that mediate the effects of stress on health: (a) an internal locus of control; (b) a sense of commitment or purpose in life; and (c) a positive attitude toward change. These factors are likely to be correlated highly with perceived self-efficacy. Silver & Wortman (1980), in a thorough and elegant review of the literature on coping identify four variables evidencing considerable promise: (a) perceived social support; (b) an opportunity to ventilate feelings; (c) an ability to find meaning in the outcome of the crisis; and (d) prior experience with other stressors. There are important caveats with regard to these variables, however. Actual social support is less important than perceived social support. This is because an individual may underestimate or overestimate support resources. Similarly, social support may be present, but the individual may be unwilling or unable to use it (Silver & Wortman, 1980). It is also possible that some social support may be harmful rather than helpful. Thus, this particular factor

requires further study. Tucker (1982), for example, reviews literature indicating the critical role of absence of support. Likewise, Beckman & Kocel (1982) suggest that an individual's characteristics affect both the ability to get help and the propensity to use it; these characteristics include demographic ones such as age and SES as well as perceptions, beliefs, traits, and social responsibilities. The notion that prior crisis experience is helpful, in like manner, is too simplistic. Bandura (1982) suggests that prior experience may be judged successful by objective observers but not by the person; and if the individual does not perceive her or himself to be efficacious, s/he will act accordingly. Similarly, Silver & Wortman (1980) suggest that different prior stressors influence later coping differentially; e.g., repeated exposure to the same stress actually may undermine an individual's self-esteem. Clearly, this area has vast potential for future study.

Some have suggested that family resources are particularly helpful in certain stressful situations. Bandura (1982), for example, notes that collective efficacy has its foundation in individual self-efficacy; individuals can work together in pursuit of common goals and achieve desired outcomes. In the same article, Bandura reports data demonstrating that husbands and wives do not perceive their spouse's efficacy uniformly; i.e., some couples agree on the ability of the spouse to effect certain outcomes; others do not. Bandura suggests that intra-relationship differences or similarities ultimately will influence outcomes. Other theorists within the family studies discipline, suggest different group characteristics. Cogswell (1976) suggests that a family is adaptable, in important crisis-coping characteristic, if it: (a) tends toward morphogenesis; (b) is self-regulating in that it regularly assesses the need for change and monitors its effects; (c) tends toward group goals (also suggested by Hill, 1965); (d) is flexible in its assignment of roles; and (e) is responsive to environmental change. Similarly, Olson, Sprenkle, and Russell (1979) address the importance of moderate amounts of cohesion and adaptability for effective family functioning. Beal (1979) conceptualizes the critical dimensions as emotional autonomy and emotional fusion. Lewis, Beavers, Gosset, and Phillips (1976) identify eight characteristics of healthy families: (a) they encourage interaction; (b) each of their members is self-respecting; (c) communication within the family is open; (d) their is a firm parental coalition rather than a dominant parent-child coalition; (e) each of their members understands the principle of multiple causality of behavior rather than simple, linear causality; (f) interaction within the family is spontaneous; (g) members are active rather than passive; and (h) members are encouraged to develop their own unique characteristics. The opportunity is at hand to operationalize these characteristics and observe their effect(s) on the crisis process. A caution is asserted, however. Many healthy combinations of these variables are possible. Kantor & Lehr (1975) and Olson et al. (1979) suggest that families may vary in important characteristics and still have healthy interaction patterns. The major point, however, is that these are group characteristics rather than individual ones and are appropriate for the study of families in crisis.

C: the family's definition of the severity of the change. Hansen and Hill (1964) cautioned about the notion that there is one family definition of any crisis situation: ". . . crisis researchers even speak of family definitions as if the family presented a unified mind to all situations" (p. 802). Subsequent scholars also have addressed this issue (McCubbin et al.,

1980; Nelson & Norem, 1981). Nonetheless, those who study family crises continue to postulate the existence and importance of the family's definition of the event, even though no one has operationalized or measured it. Several questions come to mind: In assessing a "family's" definition, is the husband's definition more important than that of other family members? Should the marital pair arrive at a definition together: Under what circumstances, and to what degree, should the child's (children's) view(s) be considered? What happens if the family members do not agree on a definition? Will the crisis be unresolvable? These and other issues make the notion of a family definition untenable. This is not to deny the importance of the perspective of the crisis, however, a factor identified in the psychological literature as well (e.g., Antonovsky, 1974). As indicated earlier, every individual in the family experiences a stressful event in a unique way. And, although Reiss and Oliveri (1980) propose that family members have a shared view of construing the world, it is unlikely that their views are identical. Therefore, each individual will have a unique view of the meaning of the crisis. These unique views may enable family members to work together toward crisis resolution or they may prevent resolution from being achieved. That is, an individual's approach to a crisis may enhance or impede the family's progress toward common goals, may embellish or reduce family cohesion, may encourage or interfere with family adaptability to affect ultimately the existence and/or nature of the resolution of the crisis. In other words, these individual perceptions interfere with, support, or have little effect on family characteristics or resources. From this perspective, the notion of a family's definition of the event confuses the study of crises and adds little to our understanding of family processes.

The issues delineated above render further use of the dominant family crisis model problematic. Perhaps Hansen and Hill (1964) said it best:

> Full understanding of families under stress. . .requires researchers to look beyond individual families, and even beyond individual persons in interaction. Both personality and community must be brought into theory and research if family stress is to be fully understood (p. 786).

Hansen and Hill (1965) are suggesting that crises are embedded within the social context; that is, differential characteristics of the variant levels of the social system contribute to the crisis process. In their extensive and elegant review of the literature, Silver and Wortman (1980) suggest three common assumptions about crises that have failed to receive empirical support: (a) their is a general pattern or response to crises; (b) there are stages of responding through which all persons are impelled; and (c) there is an acceptance or resolution of crisis. Instead, they report considerable evidence supporting different responses to the same crisis as well as to different crises, no predictable stages of responding, and nonacceptance or inability to resolve crises. Similarly, McCubbin and Patterson (1981) suggest that reduction of crisis may be an inappropriate outcome measure. Instead, they suggest the concept of family adaptability. Perhaps our inability to find a common pattern results from out lack of attention to the differing contexts of individual and familial crises. The next section of the paper proposes a model

that attends to contextual issues.

An Eclectic Model of Nonnormative Crises with a Focus on Context

Existent crisis models have as their focus one level of impact; e.g., the individual, or the family, or the community; they do not reflect the underlying interdependence of these levels. A major assumption of the proposed model is that the levels of the social system are interdependent; i.e., the individual, dyadic, familial, social network, community, and cultural levels are interrelated and each level is subsumed in the one above it. Each realm or level consists of independent and dependent variables that directly and indirectly affect and respond to each other as well as the variables in the other levels. Therefore, when a crisis event occurs, it is important to isolate the level of impact and recognize the rippling effect this crisis has on adjacent levels of the social system. Specifically one level (or more) is directly affected whereas, due to system interdependence, indirect effects spread beyond the immediate site of impact to other stratum (strata) in the social system.

For example, when a divorce occurs, all members of the family are directly affected, albeit uniquely. (This "family" level crisis presumes individual and dyadic effects.) Members of the social network, however, e.g., kin and friends, are affected indirectly. For example, grandparents may be restricted in the frequency with which they visit with grandchildren and "couple" friends may forego group encounters with the former marital pair in favor of individual meetings. Note that direct versus indirect effects do not speak to the severity of stress; rather, thay allow a focal point for crisis analysis and aid our understanding of unique individual responses to crisis situations.

The following propositions are offered--and illustrated--with respect to the multiple effects of a crisis:

1. All crises have both direct and indirect effects. (This proposition has been illustrated above.)

2. A crisis has its impact primarily at one level of the social system (subsuming the systems below that level). The individuals, relationships, families within that level are directly affected by the crisis.

3. Members of the larger, adjacent social system(s) are indirectly affected by the crisis.

These propositions are illustrated through the personal account of an individual's mastectomy (Rollin, 1976). After Betty Rollin's mastectomy, she (directly affected, individual level) was plagued temporarily by fear of death, developed a new sense of her physical vulnerability, suffered a temporary loss of self-esteem, and was temporarily unemployed. Her husband (indirectly affected, relationship level) was stressed by his wife's difficulty in coping. Betty also made the decision to seek a divorce (indirectly affected, relationship level) which resulted in additional stresses on her husband (indirectly affected, individual level by secondary crisis occurring directly at the dyadic level). This example is further explicated in Figure 1.

Insert Figure 1 about here

4. Some individuals are affected indirectly by the far-reaching consequences or residual effects (Perlman & Warren, 1977) of a crisis.

For example, following an extensive flood, a local resident not directly affected by the flood temporarily may be limited in terms of access to medical and/or social services, since these services probably are mobilized for the aid of direct victims.

The following propositions are offered--and illustrated--with respect to the level(s) of impact of a crisis:

1. All crises have an impact at more than one level.

This proposition parallels the notion of direct and indirect effects, although, since higher levels of the social system subsume lower ones, it is possible for a crisis to have a direct impact at more than one stratum.

2. Crises which have direct impact at more than one level of the social system are more serious crises; i.e., the more individual or social units directly involved, the greater the severity of the crisis.

For example, disasters are serious crises because they deplete resources at several levels of society. These propositions are illustrated through the account of the Buffalo Creek Flood of West Virginia (Erikson, 1977). This flood completely destroyed several communities/neighborhoods and partially destroyed other communities/neighborhoods adjacent to the creek. Extensive loss of life and property were sustained. Direct affects occurred at the individual level (death, loss of loved ones, loss of property, loss of confidence in the land), the dyadic level (loss of a spouse/child/parent, loss of role), the familial level (loss of home, cohesiveness), the social network level (loss of kith and kin, loss of communality), the community level (loss of life, property, material resources), while indirect affects occurred at the national/cultural level (called upon to offer help in terms of loans, temporary housing, and labor). This example is further explicated in Figure 2.

Insert Figure 2 about here

One proposition is offered--and illustrated--with respect to the nature of stressors as they influence effects:

1. Chronic stress results in a qualitatively different crisis process than acute stress; these effects are both direct and indirect.

For example, an event such as a temporary (six month) lay-off of the primary wage earner in a family results in changes on the part of individual family members with regard to spending habits, delay of needs or wants, and, perhaps, working patterns. These effects are likely to be short-term, however; when the primary wage earner returns to work, family members probably will return to earlier behavior patterns. If, however, the primary wage earner is unemployed for a five year period, both stress and behavior change are long-term.

The importance of socio-historical factors. Although it may be useful to know something about the nature of the stressor in a particular crisis, it is of greater utility to know something about the individuals, marriages, families, and networks exposed to the stress; that is, to know something about their history, their current state, and their expectations about the future. Detailed information of this nature places the crisis in socio-historical context (Brown, 1974). The importance of socio-historical factors is evidence in the writings of individuals about specific crises. Rollin (1977), for example, explains that breast cancer affected her in a unique way, primarily because of her personal history of perfect health. Having never been sick, she reasons that the diagnosis of cancer--a very serious illness requiring extensive, post-surgical monitoring--especially was difficult for her. (Although this may not be the case, her believing it to be so--her perception of this illness as extremely severe--is an important factor.) Similarly, Caine (1975), in her account of the first traumatic years following her husband's death, reports that many of her difficulties resulted from her lack of acquaintance with the family's financials circumstances and the consequences of her poor financial decision making. In an eloquent account of the importance of context in understanding reactions to the stress of a flood and its aftermath, Kai Erikson (1976) explains the history of the Buffalo Creek area, the characteristics of its people--their personalities, values, abilities, how they organized their lives, and what they asked of the future--the quality of their relationships--with their spouses, their children, their neighbors, and their employers--and the nature of the assistance provided, local as well as federal. These individual, familial, and communal histories are drawn upon to explain the reactions to the flood in addition to their inability to recover from it. Reflecting on the loss of communality, for example, Erikson writes:

> A good part of their personal strength turned out to be the reflected strength of the collectivity. . ., and they discovered that they were not very good at making decisions, not very good at getting along with others, not very good at maintaining themselves as separate persons in the absence of neighborly support. (P. 215)

Erikson postulates that the failure to recover from this crisis is due, in part, to the loss of neighborhood or communality on which the individuals and families were dependent. Without the knowledge that the communities around Buffalo Creek were characterized by a strong degree of social interdependence, one would be hard pressed to explain the extensiveness and duration of the crisis for the residents of the area. With that knowledge, one can understand why relocation to temporary HUD housing on a first come, first served basis, separated individuals from a network that formed a significant part of their lives.

Thus, not only is it necessary to consider the extant social context at the time of a crisis, it is also crucial to place that context in its own socio-historical milieu. As we begin to know more about individuals, relationships, and families, their histories, circumstances, and anticipations for the future, we will understand more fully the processes they experience when they encounter crisis.

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Figure 1

Context of a Crisis: Mastectomy

Note: Complete explanation of this crisis requires a thorough knowledge of socio-historical factors, i.e. antecendent states, extant factors, and anticipated future conditions, in the affected levels of the social system.

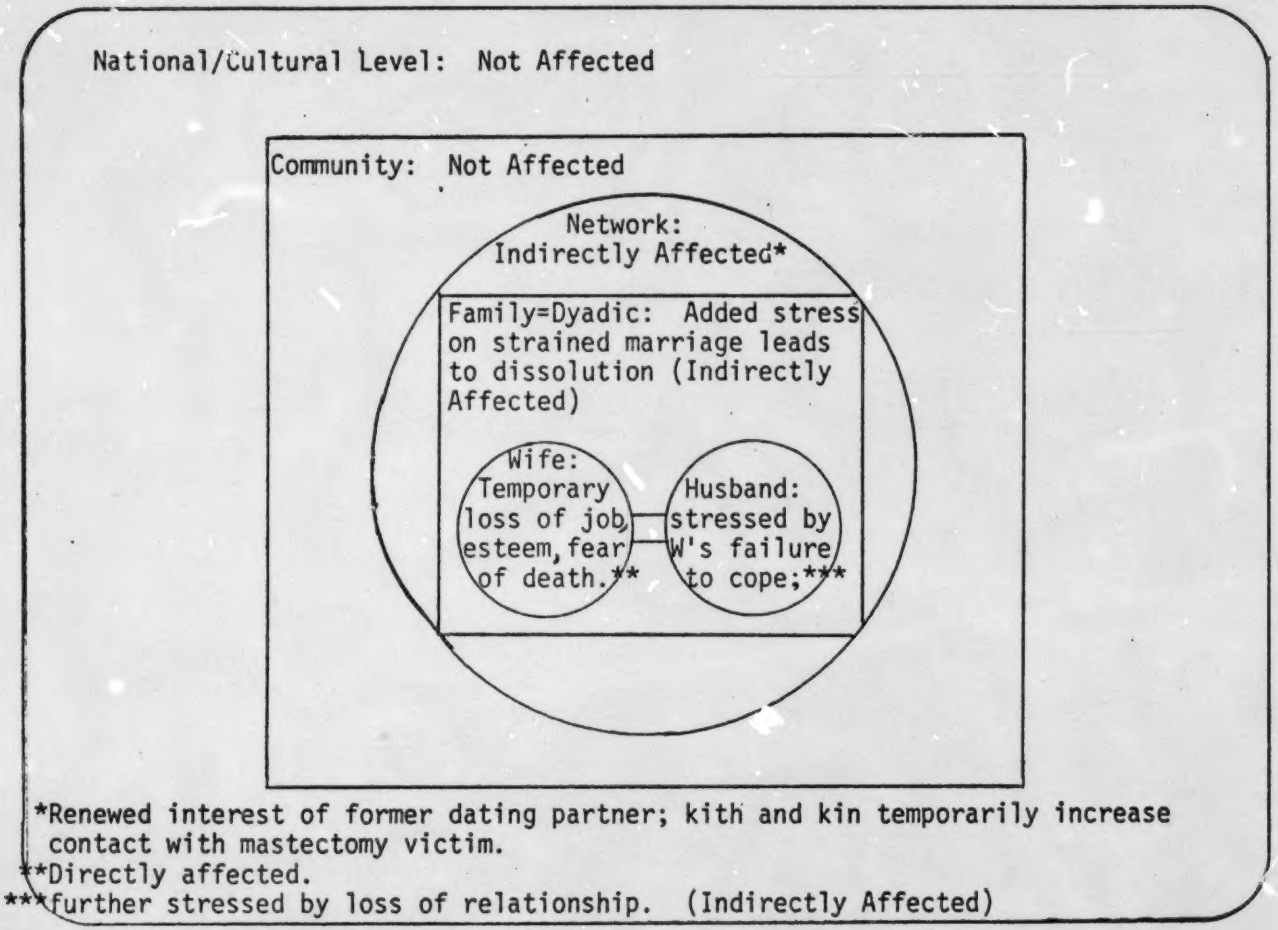
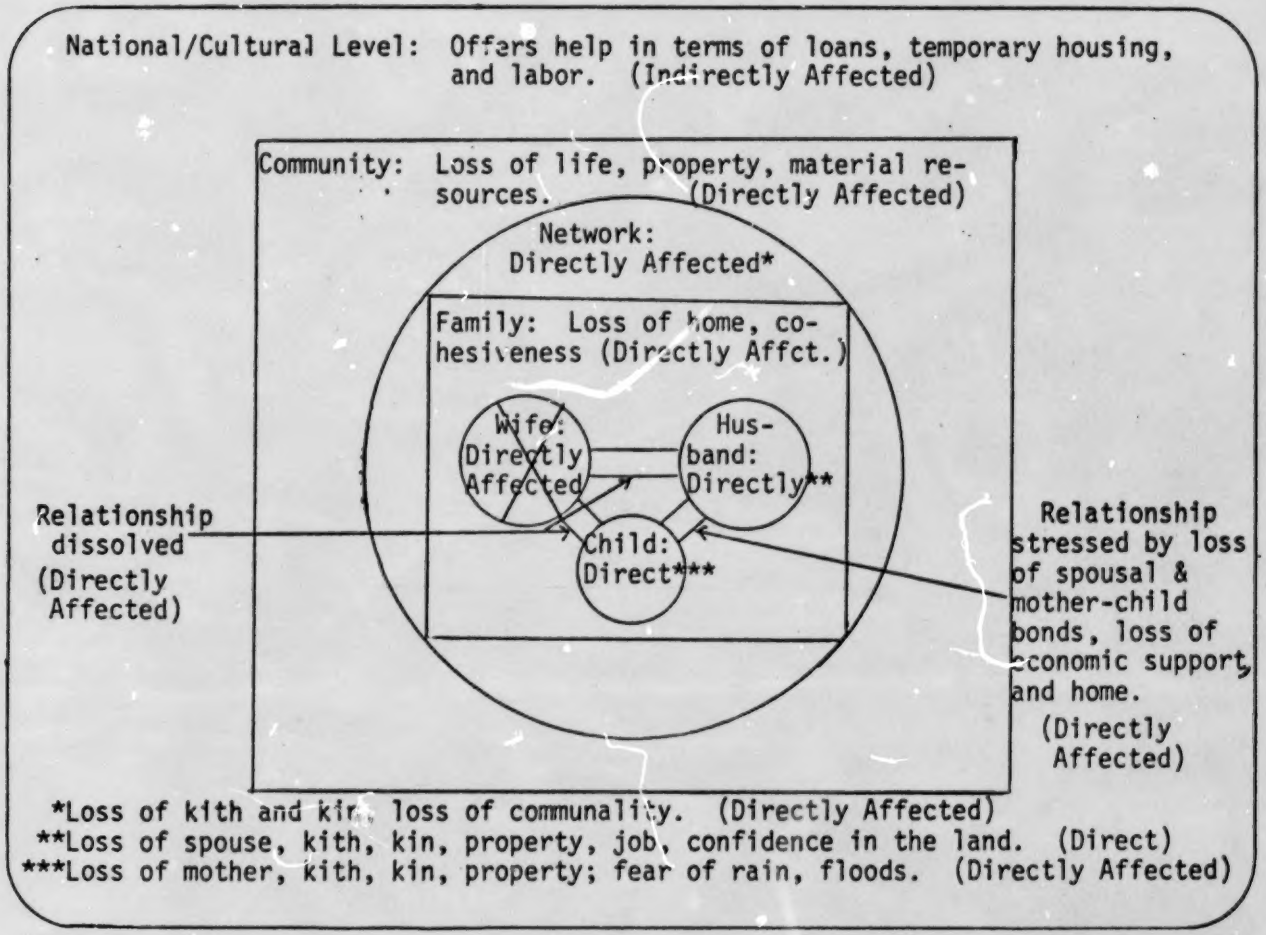

National/Cultural Level: Not Affected
Community: Not Affected
Network: Indirectly Affected*
Family=Dyadic: Added stress on strained marriage leads to dissolution (Indirectly Affected)
Wife: Temporary loss of job, esteem, fear of death.**
Husband: stressed by W's failure to cope;***
*Renewed interest of former dating partner; kith and kin temporarily increase contact with mastectomy victim.
**Directly affected.
***further stressed by loss of relationship. (Indirectly Affected)

Figure 2

Context of a Crisis: Flood

Note: Complete explanation of this crisis requires a thorough knowledge of socio-historical factors; i.e.; antecendent states, extant factors, and anticipated future conditions, in the affected levels of the social system.


National/Cultural Level: Offers help in terms of loans, temporary housing, and labor. (Indirectly Affected)
Community: Loss of life, property, material resources. (Directly Affected)
Network: Directly Affected*
Family: Loss of home, cohesiveness (Directly Affct.)
Wife: Directly Affected
Husband: Directly**
Child: Direct***
Relationship dissolved (Directly Affected)
Relationship stressed by loss of spousal & mother-child bonds, loss of economic support, and home. (Directly Affected)
*Loss of kith and kin, loss of communality. (Directly Affected)
**Loss of spouse, kith, kin, property, job, confidence in the land. (Direct)
***Loss of mother, kith, kin, property; fear of rain, floods. (Directly Affected)